COMCAST SPOTLIGHT

POLITICAL RECORD OF REQUEST: FEDERAL, STATE & LOCAL CANDIDATE ADS ALL QUESTIONS MUST BE ANSWERED

□ Federal Candidate
State or Local Candidate
1. Requested by: LIKBY COCHLAW ——— (Agency name, address, phone number & contact)
2. On behalf of: (Candidate name & authorized campaign committee name)
3. Election: (Office sought & date) JOHNSON Co. SHERIKE 5/8/18
4. Date of request: 5/18/17
5. Request received by: MARK Sun HAM
6. Details/Content of the Ad: LMAGE AD: 15
7. Name, address & phone number of contact person for the candidate or candidate's authorized campaign committee:
SAME AS ABOVE
8. Name of treasurer of authorized committee: LAKKY WEAVER
9. Date and nature of follow-ups, if any:
10. Disposition:
11. Accepted – see attached contract details
☐ Rejected – provide reason:
Signed:
Name and Title: MARK DUNITAM Sales Ulgs.
9/25/17